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## GARY M. COHEN

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STRAFFORD BUILDING NUMBER THREE 125 STRAFFORD AVENUE, SUITE 300 WAYNE, PA 19087-3318

> Tel: (610) 975-4430 Fax: (610) 975-4436 (610) 687-7861

E-MAIL: GMCIPLAW@AOL.COM

April 23, 2009

## FACSIMILE COVER SHEET

Page 1 of 31

TO:	RE:
Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application No. 10/542,451 Filed: July 15, 2005
TELEPHONE:	FACSIMILE:
(571) 270-3646 Examiner: Yogesh P. Patel	(571) 273-8300

## **MESSAGE**

The following documents are submitted with this Cover Sheet:

Request for Continued Examination (RCE) Transmittal Amendment Pursuant to 37 C.F.R. §1.114
Information Disclosure Statement
(with one PTO-1449 Form and a copy of FR 2,618,357)
Transmittal Sheet

## CONFIDENTIALITY NOTE:

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PLEASE CONFIRM THE SAFE RECEIPT OF THIS TRANSMISSION

Attorney's Reference: MICROM19. DO9

In re the Application of: Hubert EUVRARD, ET AL.

6109754436

Application No.: 10/542,451

Filed: July 15, 2005

For: IMPROVEMENT TO DENTAL POWER INSTRUMENTS, SUCH AS ENDODONTIC INSTRUMENTS, AND CONTRA-ANGLE HANDPIECE

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Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Str:

Transmitted herewith is an Amendment for the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has proviously been established.
- [X] A "Request for Continued Examination (RCE) Transmittal" is enclosed. Also enclosed is the fee (\$405.00) required for filing this Request under 37 C.F.R. §1.17(e).
- [X] An Information Disclosure Statement is enclosed. Also enclosed is one (1) PTO-1449 Form and a copy of FR 2,618,357.
- [X] No additional fee for claims is required.

	(Co1, 1)		(Co1. 2)		(Co1, 3)	SMALL_ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS AFTER AMENDMENT		HIGHEST NO- PREVIOUSLY PAID FOR		PRESENT _EXTRA	ADDITIONAL FEE	<u>OR</u>	ADDITIONAL FEE
TOTAL .	9	MINUS	20		0	× 26 = \$	_	× 52 = \$
INDEPENDENT	1	MINUS	3	=	. 0	x 110 = \$	<del></del>	× 220 = \$
FIRST PRESENT	ATION OF MULT	IPLE DE	PENDENT CLAIR	4		+ 195 = \$	_	+ 390 = \$
						TOTAL = \$	<u>ÔR</u>	TOTAL - \$

[X] It is hereby petitioned for an extension of time in accordance with 37 C.F.R. §1.136(a). The appropriate fee required by 37 C.F.R. §1.17 is calculated as shown below.

	Small Entity	Other than Small Entity				
	Response filed within:	Response filed within:				
	[X] first - \$ 65.00	[] first - \$ 130.00				
	[ ] second - \$245.00	[ ] second - \$ 490.00				
	[ ] third - \$555.00	[ ] third ~ \$1,110.00				
	[ ] fourth - \$865.00	[ ] fourth - \$1,730.00				
	month after time period set	month after time period set				
<b>FY</b> 7	Planca charge my formatic Assessment No. 02 040F 4 11-					

- [X] Please charge my Deposit Account No. 03-2405 in the amount of \$ 470.00.
- [ ] A check in the amount of \$\_\_\_\_\_ is attached.
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-2405.
  - [X] Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.
  - [X] Any patent application processing fees under 37 C.F.R. §1.17.

Agril 23, 2009 (date)

GARY M. COHEN, ESO.
Reg. No. 28,834
Attorney for Applicants

Reg. No. 28,834 Attorney for Applicants Telephone: (610) 975-4430